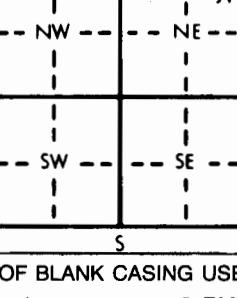


1 LOCATION OF WATER WELL:	Fraction County: Gray	NE $\frac{1}{4}$ NE $\frac{1}{4}$ NE $\frac{1}{4}$	Section Number 14	Township Number T 26 S	Range Number R 28 E			
Distance and direction from nearest town or city street address of well if located within city? 23 1 mile south of Cimarron, Ks. on highway								
2 WATER WELL OWNER:	Homer Falgout					Board of Agriculture, Division of Water Resources		
RR#, St. Address, Box #:						Application Number:		
City, State, ZIP Code:	Cimarron, Kansas 67835							
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:						4 DEPTH OF COMPLETED WELL..... 215 ft. ELEVATION: _____		
	Depth(s) Groundwater Encountered 1. _____ ft. 2. _____ ft. 3. _____ ft.							
	WELL'S STATIC WATER LEVEL 68 ft. below land surface measured on mo/day/yr					June 12, 1981		
	Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm							
	Est. Yield 40 gpm: Well water was _____ ft. after _____ hours pumping _____ gpm							
	Bore Hole Diameter 8 in. to 215 ft., and _____ in. to _____ ft.							
	WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well							
	1 Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below)							
	2 Irrigation 4 Industrial 7 Lawn and garden only 10 Observation well							
	Was a chemical/bacteriological sample submitted to Department? Yes..... No. XX ; If yes, mo/day/yr sample was submitted							
	Water Well Disinfected? Yes XX No							
5 TYPE OF BLANK CASING USED:	1 Steel 2 PVC	3 RMP (SR) 4 ABS	5 Wrought iron 6 Asbestos-Cement 7 Fiberglass	8 Concrete tile 9 Other (specify below)	CASING JOINTS: Glued XX Clamped _____			
Blank casing diameter	5 in. to	215 ft., Dia.	in. to _____ ft., Dia.	in. to _____ ft.	Welded _____			
Casing height above land surface	12 in., weight	200 psi	lbs./ft. Wall thickness or gauge No. SDR 21					
TYPE OF SCREEN OR PERFORATION MATERIAL:	1 Steel 2 Brass	3 Stainless steel 4 Galvanized steel	5 Fiberglass 6 Concrete tile	7 PVC 8 RMP (SR) 9 ABS	10 Asbestos-cement 11 Other (specify) 12 None used (open hole)			
SCREEN OR PERFORATION OPENINGS ARE:	1 Continuous slot 2 Louvered shutter	3 Mill slot 4 Key punched	5 Gauzed wrapped 6 Wire wrapped 7 Torch cut	8 Saw cut 9 Drilled holes 10 Other (specify)	11 None (open hole)			
SCREEN-PERFORATED INTERVALS:	From. 190	ft. to 210	ft., From _____ ft. to _____ ft.	ft. to _____ ft. to _____ ft.	ft. to _____ ft. to _____ ft.			
GRAVEL PACK INTERVALS:	From. 20	ft. to 210	ft., From _____ ft. to _____ ft.	ft. to _____ ft. to _____ ft.	ft. to _____ ft. to _____ ft.			
6 GROUT MATERIAL:	1 Neat cement	2 Cement grout	3 Bentonite	4 Other				
Grout Intervals:	From. 5 ft. to 20	ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.						
What is the nearest source of possible contamination:	1 Septic tank 2 Sewer lines 3 Watertight sewer lines	4 Lateral lines 5 Cess pool 6 Seepage pit	7 Pit privy 8 Sewage lagoon 9 Feedyard	10 Livestock pens 11 Fuel storage 12 Fertilizer storage 13 Insecticide storage	14 Abandoned water well 15 Oil well/Gas well 16 Other (specify below)			
Direction from well?	East	How many feet? 100						
FROM	TO	LITHOLOGIC LOG		FROM	TO	LITHOLOGIC LOG		
0	15	Top soil & fine to medium sand						
15	30	Medium to coarse sand						
30	60	Coarse sand						
60	75	Coarse sand & layers of sand rock						
75	105	Medium sand & clay layers						
105	135	Medium sand						
135	165	Clay & medium to coarse sand						
165	195	Clay & medium to coarse sand						
195	225	Coarse sand						
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION:	This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) June 13, 1981					and this record is true to the best of my knowledge and belief. Kansas		
Water Well Contractor's License No. 179						This Water Well Record was completed on (mo/day/yr) Sept. 3, 1981		
under the business name of Joe's Well Service, Inc. Cimarron, Ks.	by (signature) 							
INSTRUCTIONS: Use typewriter or ball point pen, PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks, underline or circle the correct answers. Send top three copies to Kansas Department of Health and Environment, Division of Environment, Environmental Geology Section, Topeka, KS 66620. Send one to WATER WELL OWNER and retain one for your records.								